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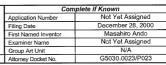
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| For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied |
| |
| reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. |
| 18. CORRESPONDENCE ADDRESS |
| Customer Number or Bar Code Label or X Correspondence address below |
| DICKSTEIN SHAPIRO MORIN & OSHINSKY LLP Thomas J. D'Amico |
| Address 2101 L Street NW |
| City Washington State Zip Code 20037-1526 |
| Country Telephope (202) 785-9700 Fax (202) 887-0689 |
| Name (Print/Type) Thomas J. D'Amico Registration No. (Attorney/Agent) 28,371 |
| Signature Date December 28, 2000 |



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| The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to | | | 3. ADDITIONAL FEES | | | | | | | | | | |
| Deposit | indicate | fees a | nd credit ar | ny overpayments | to | Large | Entity | Smal | I Entity | | | | |
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| | e Any Add equired U | | | Applicant of entity status | lams small See | 139 | 130 | 139 | 130 | Non-Engli | ish specifical | ion | |
| 37 CF | IR 1.16 an | d 1 17 | | 37 CFR 1 2 | 7 | 147 | 2,520 | 147 | 2,520 | For filing a | request for e | x parte reexamination | |
| 2. X | Payme | nt Encl | osed | | | 112 | 920* | 112 | 920* | Requestir Examiner | | of SIR prior to | |
| X Chec | * 🔲 | Credit | Card | Money Order | Other | 113 | 1,840* | 113 | 1,840* | Requestir Examiner | ng publication action | of SIR after | |
| | | FEE | CALCUL | ATION | | 115 | 110 | 215 | 55 | Extension | for reply wit | hin first month | |
| 1. BASIC FILING FEE | | 116 | 390 | 216 | 195 | Extension | for reply wit | hin second month | | | | | |
| Large Ent | tity Sr | nall En | tity | | | 117 | 890 | 217 | 445 | Extension | for reply wit | hin third month | |
| | | | Fee Fee (\$) | Description | Fee Paid | 118 | 1,390 | 218 | 695 | Extension | for reply wit | hin fourth month | |
| 101 | 710 2 | 01 | 355 Utility | filing fee | 710 00 | 128 | 1,890 | 228 | 945 | Extension | for reply wit | hin fifth month | |
| 106 | 320 2 | 06 | 160 Desig | n filing fee | | 119 | 310 | 219 | 155 | Notice of | Appeal | | |
| 107 | 490, 2 | 07 | 245 Plant | filing fee | | 120 | 310 | 220 | 155 | Filing a br | ief in suppor | t of an appeal | |
| 108 | 710 2 | 08 | 355 Reiss | sue filing fee | | 121 | 270 | 221 | 135 | Request f | or oral heari | ng | |
| 114 | 150 2 | 14 | 75 Provi | sional filing fee | | 138 | 1,510 | 138 | 1,510 | Petition to | institute a p | ublic use proceeding | |
| | | | UBTOTAL | 40 (0) | 710 00 | 140 | 110 | 240 | 55 | Petition to | revive – un | avoidable | |
| | | 3 | OBTOTAL | . (1) (S) | 710 00 | 141 | 1,240 | 241 | 620 | Petition to | revive - uni | ntentional | |
| 2. EXTRA | CLAI | M FEE | S Extra Claims | Fee from below | Fee Paid | 142 | 1,240 | 242 | 620 | Utility issu | ue fee (or rei | isue) | |
| Total Claim | s 25 | -20** | = 5 | x 18.00 = | 90 00 | 143 | 440 | 243 | 220 | Design is | sue fee | | |
| Independer Claims | 1t 2 | -3** | - [] | × = | | 144 | 600 | 244 | 300 | Plant issu | e fee | | |
| Multiple De | pendent | | | - | | 122 | 130 | 122 | 130 | Petitions | to the Comm | issioner | |
| | | | | | | 123 | 50 | 123 | 50 | Petitions | related to pro | visional applications | |
| Large Enti | ty Smal | I Entity | | | | 126 | 240 | 126 | 240 | | | tion Disclosure Stmt | |
| Fee Fe Code (\$ | | Fee (S) | | Fee Description | n | 581 | 40 | 581 | 40 | Recording property (| g each paten times numb | t assignment per er of properties) | |
| 103 18 | 203 | 9 | Claims in | excess of 20 | | 146 | 710 | 246 | 355 | Filing a si (37 CFR | | er final rejection | |
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| SUBMITTE | n BV | | | | | _ | _ | _ | | | Complete / | if applicable) | |
| | | Ch o as | aa I D!A | mala a | () | Regist | ration No | 20 | .371 | - | | | |
| Name (prir | vrype) | noma | as J. D'A | WIIICO / | / | | ey/Agent | | ,371 | | rerepnone | (202) 828-2232 | |

| SUBMITTED BY | | | / | | Complete (| if applicable) |
|----------------------|------------------|-----------|--------------------------------------|--------|------------|-------------------|
| Name (print/type) Th | nomas J. D'Amico | $\sqrt{}$ | Registration No. (Attorney/Agent) | 28,371 | Telephone | (202) 828-2232 |
| Signature | | Tox | | 1 | Date | December 28, 2000 |